

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DN</i>	<i>32</i>	<i>1/18</i>
FORMALITY REVIEW	<i>H.T</i>	<i>913</i>	<i>11/14/01</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

**BEST AVAILABLE COPY**

Claim	Final	Original	Date
1	✓	✓	10/16/02
2	✓	✓	2/24/03
3	✓	✓	5/17/03
4	✓	✓	10/24/03
5	✓	✓	
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50	✓	✓	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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